10/70/960

								·	Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2003									1	0	70	175	60
	:	CLAIMS AS	•	FILED - PART I (Column 1)		(Column 2)		SMALI TYPE	EN		QR	OTHER SMALL I	
TOTAL CLAIMS								RATI	E	FEE		RATE	FEE
FOR		NUMBER FILED		NUMBER EXTRA			BASIC	FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			minus 20=		•			XS 9=		·	OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		•		·	X43=			OR	X86=	
MULTIPLE DEPENDENT CLAIM PR			RESENT	•			·	+145=			OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTA			OR			
CLAIMS AS AMENDED - PART II  [2-27-06 (Column 1) (Column 2) (Column 3)								SMA	LL E	NTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO	EST BER DUSLY	PRESENT EXTRA		RAT	E	ADDI- TIONAL /FEE	•	RATE	ADDI- TIONAL FEE
	Total	7	Minus	** 5	8	= (5)		XS 9	) <b>=</b>		OR	X\$18=	
	Independent	. 5	Minus	***	4	<b>-</b> Ø.		X43	=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						j	+145	=		OR	+290=		
5,007 5,9,11,12,13									TAL		OR	TOTAL ADDIT. FEE	
	7.700	(Column 1)	<b>.</b>	(Colur	كالمراجع المراجع	(Column 3)	ኒ ,			4701			
AMENDMENT B		REMAINING AFTER AMENDIMENT		NUM PREVK	BER OUSLY	PRESENT EXTRA		RAT	E	ADDI- TIONAL	ý	RATE	TIONAL FEE
	Total	• (0	Minus	<b>~</b> (X)	8_			XS 9	)= 		OR	X\$18=	
	Independent	NTATION OF MI	Minus	MANUELI	5	I A	-	X43	<b>=</b>	X	OR	X86=	
ــــــــــــــــــــــــــــــــــــــ	rinoi PRESE	INTION OF MI	JET IF CE DET	CARCIA				+145	)= 		OR	+290=	
•	• .			•	•	•		TO ADDIT.	TAL		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)											•	•	
AMENDMENTC		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	IEST IBER OUSLY FOR	PRESENT EXTRA		RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	AMENUMENT	Minus	PAID 44	IUN	E	1	XS 9		FEE		X\$18=	1 1.1.
	Independent	•	Minus	***	<del></del>	2	1	X43		<u> </u>	OR	Y0C-	-
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								=	<u> </u>	OR		<del> </del>
_							<del></del>	+145			OR	•	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
	The "Highest Nurr	mber Previously Pai ber Previously Pai	d For (Total o	r Independ	is less wa lent) is the	e highest numl	ber fo	und in th	ie app	propriate bo	x in c	olumn 1.	